REMARKS

Claims 1-14 are pending in this application with claims 1 – 6, 8, 9, and 11-14 being amended by this response. New claims 15 – 18 are added for consideration. Support for the amendments to the claims and the newly added claims may be found in the originally filed claims as well as in the description provided in connection with Figures 1 and 2. Specifically support for the amended features may be found on page 5, lines 15 – 30 and page 6, lines 5 – 10 and 27 – 29 and other places. In view of the support provided, Applicant respectfully submits that no new matter is added by either the amendments to the claims or the newly added claims.

Rejection of Claim 4 under 35 USC 101

Claim 4 is rejected under 35 USC 101 because the claimed invention is directed to non-statutory subject matter. Specifically, the Rejection asserts that claim 4 is directed towards a computer program that is not limited to being embodied on a tangible computer-readable medium. Applicant respectfully disagrees. Rather, amended claim 4 clear recites "a rules processor" which generates an alert message and for "automatically initiating generation of an alert message for communication to a healthcare worker, in response to determining inappropriate radiation settings of a radiation imaging or therapy device in response to said combined therapeutic dose value". The claimed rules processor is embodied in hardware that is able to perform the claimed function. The "processor" claimed in amended claim 4 is a structural element included in the present claimed apparatus. The structural element is defined by the functionality thereof and is not software per se. A processor may be hard-coded with specific instructions enabling the apparatus to perform the claimed operation. Specifically, the term processor denotes a computer readable medium having the instructions coded thereon or a hardware device employing such a medium and "it becomes structurally and functionally interrelated to the medium and will be statutory in most cases since use of technology permits the function of the descriptive material to be realized" (see MPEP 2106.01). Therefore Applicant respectfully submits that claim 4 is statutory subject matter in accordance with 35 USC 101. Therefore, withdrawal of the rejection of claim 4 is respectfully requested.

Rejection of Claims 1 – 15 under 35 USC 112, second paragraph

Claims 1 – 15 are rejected under 35 USC 112, second paragraph as being indefinite for failing to particularly point out and distinctly claim the subject matter which applicant regards as the invention. Specifically, the claimed invention does not state how the first and second doses are combined to produce a therapeutic dose value. Claim 1 has been amended to recite that the "data processor" produces the combined therapeutic dose value "by automatically summing values representing said first and second dose". In view of the amendment to claim 1, Applicant respectfully submits that the present claimed invention fully complies with 35 USC 112, second paragraph. Therefore, Applicant respectfully requests withdrawal of this rejection.

Rejection of Claims 1, 3, 7, 8, 11-13 under 35 USC § 102(b)

Claims 1, 3, 7, 8 and 11-13 are rejected under 35 U.S.C. 102(b) as being anticipated by Wessol et al (U.S. Patent No. 6,965,847). These claims, as amended, are deemed to be patentable for the reasons given below.

Amended claim 1 provides a system for processing data concerning patient radiation treatment. An input processor receives data identifying a first radiation dose, received by a particular anatomical part of a patient, from a radiation source external to a patient and a second radiation dose, received by the particular anatomical part of the patient from a radiation source internal to the patient and implanted within the patient. A data processor combines data representing the first and second dose by automatically summing values representing the first and second dose to provide a combined therapeutic dose value representing a total cumulative radiation dose received by the particular anatomical part of said patient. A storage processor automatically stores the combined therapeutic dose value in an electronic record associated with the patient in a repository concurrently accessible by a plurality of different healthcare workers using remote devices. A workflow processor schedules and manages a sequence of tasks involved in producing a treatment plan using the electronic record including the combined therapeutic dose value. For the reasons presented below, Wessol fails to provide any 35 USC 112 compliant enabling disclosure of the features claimed in amended claim 1 and therefore does not anticipate the present claimed invention.

Wessol, unlike the present claimed invention, provides a method and system for developing a dosimetry plan for a treatment volume irradiated during radiation therapy with a radiation source concentrated internally within a patient **OR** incident from an external beam (See Abstract). The Wessol system and method is concerned with providing geometric models of data that will not substantially inhibit the amount of time it takes the system to perform dosimetric calculations to be used with the radiation therapy (col. 3, lines 10 – 21). The Wessol system geometrically models the amount of radiation and enables a user to increase the dose to be targeted to the specific portion of the patient's anatomy. This is fundamentally different from the present claimed invention which receives data representing dosing information from two radiation sources (one internal to a patient and one external from a patient) to be combined into a single value that is added to a patient record and that is used by "a workflow processor for scheduling and managing a sequence of tasks involved in producing a treatment plan".

The Rejection cites element "26" in Figure 1 of Wessol as anticipating the claimed "input processor" which receives the first and second radiation dose data. Applicant respectfully disagrees. Rather, element 26 in Figure 1 is a BIOS or Basic Input/Output System that includes "the basic routines that help to transfer information between elements **within the computer 20**, such as during start-up" and which may be stored in a read only memory. This is fundamentally different from and can not be reasonably interpreted to be equivalent to the present claimed input processor. The control of the internal operations of a computer system as in Wessol, is NOT equivalent to an input processor for receiving the data such as claimed in claim 1.

Moreover, Wessol fails to disclose or suggest "a data processor for combining data representing said first and second dose by **automatically summing values representing said first and second dose** to provide a combined therapeutic dose value representing a total cumulative radiation dose received by said particular anatomical part of said patient" as recited in amended claim 1. Figure 3 of Wessol describes obtaining information regarding internal and external radiation sources (Fig. 3, 110 and 113). However, the information received by the Wessol regarding radiation from internal and external sources is not "automatically summed" to produce "a combined therapeutic dose value representing a total cumulative radiation dose received by said particular anatomical part of said patient" as in the present claimed invention. In fact, as stated in column 8, lines 40 – 58 and shown in Figure 3, data representing imagery of the radiation emitted from the internal radiation source is acquired mutually exclusively from the data representing imagery of the radiation emitted from any external radiation source. Moreover, this imagery data obtained and visualized by the Wessol system is from a radiation source that introduces radiation in "concentrations or amounts smaller than required to conformally irradiate the treatment volume, yet large enough to be observed so as to obtain data or information on the irradiation" (col. 8, line 7 – 10). Wessol provides for computationally escalating and/or enhancing the respective imagery data to produce a visual depiction regarding the effect the radiation has on a particular body part enabling more precise calculations for changing a treatment plan so as to improve the efficacy thereof (column 8, lines 21 – 39). There is no mention of automatically combining data from two different radiation sources to come up with a cumulative therapeutic dose as in the feature combination of the present claimed invention.

Additionally, the present claimed invention is concerned with radiation treatment planning using a total amount of radiation that is applied to a particular body part and using the "combined therapeutic dose value" that is stored in a patient record "for scheduling and managing a sequence of tasks involved in producing a treatment plan using said electronic record". Wessol neither discloses nor suggests this feature. As discussed above, Wessol fails to provide "a combined therapeutic dose value" because Wessol is concerned with a single radiation source that emits an amount of radiation less than therapeutically required but in an amount enabling creation of a radiation image to improve dosage changes for the particular patient on the particular body part. . While Wessol provides that the single source may be internal or external from the patient, this is not equivalent to "automatically summing values representing said first and second does" where the first dose is "from a radiation source external to a patient" and the second dose is "received by said particular anatomical part of said patient from a radiation source internal to and implanted within said patient" as recited in the present claimed invention. Thus, while Wessol provides hardware storage elements, there is no 35 USC 112 compliant enabling disclosure of the claimed "storage processor" that stores the combined value in "an electronic record associated with said patient" and which is "concurrently accessible by a plurality of different healthcare workers" as recited in the present claimed invention. The claimed system uses the combined therapeutic value of radiation to schedule and manage tasks to produce a treatment plan for a patient. Thus, the claimed feature of concurrent access to a storage repository having the combined therapeutic value stored therein advantageously enables multiple different users in different locations access to the information to facilitate creating a patient treatment plan. Wessol does not contemplate this feature because the Wessol system is wholly unrelated to "scheduling and managing a sequence of tasks involved in producing a treatment plan" using "combined therapeutic dose value" of radiation received from internal and external sources. Rather, Wessol uses a test amount of radiation to create an image that may be escalated to improve a workers ability to make dosage modifications for the particular patient.

Wessol is concerned with producing geometric models of radioactivity of a radiation source to better understand and see the impact of the radiation on the patient in hopes of improving radioactive therapy. There is no 35 USC 112 compliant enabling disclosure of the claimed "workflow processor" which schedules and manages tasks for use in producing a treatment plan using the electronic record that includes the combined therapeutic dose value. There is no equivalent structure disclosed or suggested by Wessol. The claimed system advantageously acquires a total amount of radiation from multiple sources to electronically document and store a combined value that is used to schedule and manage tasks in patient treatment plan that must also comply with Nuclear Regulatory Commission (NRC) regulations regarding safe levels of radiation. Thus, the combined therapeutic dose value facilitates treatment planning to ensure that, despite irradiation therapy, the patient will be able to safely intermingle with the public (Application, page 3 line 2 – page 4, line 3). Wessol, as discussed above, uses a known amount of radiation from a single radiation source to produce an image that improves the ability of a healthcare worker to change/modify the dose of radiation to be applied to the patient. Wessol is an imaging system that aids in dosage calculations. In contrast, the claimed arrangement uses a "workflow processor" that uses combined therapeutic dose value of radiation from internal and external sources to aid in "scheduling and managing a sequence of tasks involved in producing a treatment plan" for the particular patient. Wessol fails to provide any equivalent structural elements that perform the claimed features.

Additionally, in response to Applicants arguments, the Rejection on page 2 asserts that a recitation with respect to the manner in which an apparatus is intended to be employed does not impose any structural limitation upon the claimed apparatus which differentiates it from a prior art reference disclosing the structural limitations of the claim. Applicant respectfully submits that the apparatus claimed in claims 1 – 13 provide structural elements i.e. "processors" defined using functional limiting language which results in the elements having structures that do in fact distinguish from the system described in Wessol. Moreover, the computer system described in Wessol cannot reasonably be inferred as inherently including the claimed elements that perform the claimed functions. Specifically, Wessol fails to disclose a structural element that is equivalent to the claimed "data processor" or the claimed "workflow processor". The present claimed structures are not contemplated by Wessol. Therefore, the claimed system is patentably distinct from Wessol.

Therefore, as each feature of amended claim 1 is neither disclosed nor suggested by Wessol, it is respectfully submitted that Wessol does not anticipate the present claimed invention. Consequently, withdrawal of the rejection of claim 1 is respectfully requested.

Claim 3 is dependent on claim 1 and is considered patentable for the reasons presented above with respect to claim 1. Claim 3 is also considered patentable because Wessol neither discloses nor suggests that "said data processor **automatically populates** a patient radiation survey record form with data derived from radiation survey equipment indicating radiation levels **emitted by a patient**". There is no 35 USC 112 compliant enabling disclosure of this feature. Wessol is only concerned with using medical imaging devices such as MRIs, etc to generate an geometric model of the radioactivity of a particular **radiation source** to improve the view in order to change the dosing thereof. Wessol is not concerned with obtaining an amount of radiation emitted by a patient. Rather, Wessol merely creates an image to improve dosage calculations for targeted radiation therapy for a patient. This is fundamentally different from the claimed system because the claimed system facilitates treatment and planning of radiation therapy that complies with NRC safety regulations by surveying a total amount of radiation emitted by internal and external radiation sources **AND** also emitted by the patient. Wessol provides no 35 USC 112 compliant enabling disclosure of an element that could or would operate in a manner equivalent to the present claimed system. Consequently, withdrawal of the rejection of claim 3 is respectfully requested.

Claim 7 is dependent on claim 1 and is considered patentable for the reasons presented above with respect to claim 1. Consequently, withdrawal of the rejection of claim 7 is respectfully requested.

Claim 8 is dependent on claim 1 and is considered patentable for the reasons presented above with respect to claim 1. Claim 8 is also considered patentable because Wessol fails to provide any 35 USC 112 compliant enabling disclosure of "a communication interface for initiating communication of an alert message to a user identifying said combined therapeutic dose value" as recited in the present claimed invention. As discussed above, Wessol does not "automatically sum" first and second dose values to produce the claimed "combined therapeutic dose value". Therefore, Wessol is unable to provide a communication interface for communicating this value to a user as in the present claimed invention. Moreover, there would be no reason for Wessol to include a feature equivalent to the claimed system because the Wessol system is concerned with producing an image of a test amount of radiation to be used to modify radiation dosage amounts for a patient. Wessol is not concerned with obtaining a combined therapeutic dose value for use in treatment planning that complies with NRC safety regulations and guidelines. Additionally, as Wessol uses known amounts of radiation to generate the image, the amount would not be at a level that would require alerting any personnel using the Wessol system. Consequently, withdrawal of the rejection of claim 8 is respectfully requested.

Claim 11 is dependent on claim 1 and is considered patentable for the reasons presented above with respect to claim 1. Claim 11 is also considered patentable because Wessol fails to provide any 35 USC 112 compliant enabling disclosure of "an interface processor for using said combined therapeutic dose value in configuring a radiation therapy device for delivering a radiation treatment to a patient" as recited in the claimed invention. The Rejection cites column 5, lines 40 – 51 of Wessol as providing anticipatory disclosure of the present claimed features. Applicant respectfully disagrees. Rather, the cited section of Wessol merely provides that the geometric image modeling performed in the Wessol system may be performed by any computing device. Using a computing device to model the effects of a single radiation source on a particular patient is not equivalent to the claimed "interface processor" that uses the "combined therapeutic dose value in configuration of a radiation therapy device for delivering a radiation treatment to a patient". The modeling done in Wessol aims to help a user change/modify radiation to a patient but provides no 35 USC 112 compliant enabling disclosure regarding how any change is to be implemented. Consequently, withdrawal of the rejection of claim 11 is respectfully requested.

Amended independent claim 12 is considered patentable for the reasons presented above with respect to claim 1. Claim 12 is also considered patentable because Wessol fails to provide any 35 USC 112 compliant enabling disclosure of "a rules processor for automatically initiating generation of an alert message for communication to a healthcare worker, in response to determining inappropriate radiation **settings** of a radiation **imaging or therapy device** in response to said combined therapeutic dose value" as recited in the present claimed invention. Wessol is concerned with computationally modeling the effect radiation has on a body part providing an enhanced manner for modifying the dosage used in the treatments. This is fundamentally different from the claimed invention which provides a system that aids in complying with government guideline associated with radioactive methods of patient treatment. Specifically, the claimed system includes a "rules processor" that interacts with radiation imaging and/or therapy devices and determines if **settings** of the device are "inappropriate" in view of the combined therapeutic dose value. Thus, the claimed system advantageously controls tasks associated with a treatment plan and ensures compliance with NRC guidelines by using a combined therapeutic dose value applied to a patient to check the settings on the radiation device to make sure they are within acceptable levels. Thus, the claimed system advantageously enables combination of two dose values from internal and external sources and provides the rules processor to automatically alert a worker if the settings of the device, in view of the combined therapeutic value, are not in compliance with specified guidelines. No feature equivalent to this is disclosed or suggested by Wessol. Consequently, withdrawal of the rejection of claim 12 is respectfully requested.

Claim 13 is dependent on claim 12 and is considered patentable for the reasons presented above with respect to claims 1 and 12. Claim 13 is also considered patentable because Wessol provides no 35 USC 112 compliant enabling disclosure of a "task manager" that performs any function and certainly fails to disclose (or suggest) updating "a record to indicate a perimeter is to be designated identifying an area around said patient to be avoided by other personnel, in response to said combined therapeutic dose value" as recited in the present claimed invention. As discussed above, the claimed system facilitates compliance with NRC guidelines to ensure that the amount of radiation received by a patient does not exceed levels that are unsafe for the general population. Thus, the claimed system updates a patient record to notify healthcare personnel of an area that needs to be avoided in response to the combined therapeutic dose value calculated for the particular patient. Wessol is merely concerned with using a known lesser amount of radioactive material to create an image that enables improved targeting for the radiation therapy by allowing a user to change or modify dosage levels based on the images created. This is fundamentally different from and not equivalent to the present claimed system. Consequently, withdrawal of the rejection of claim 13 is respectfully requested.

In view of the above remarks and amendments to the claims, Applicant respectfully submits that Wessol fails to provide any 35 USC 112 compliant enabling disclosure that would anticipate the present invention as claimed in claims 1 and 12. As claims 3, 7 – 9 and 11 are dependent on claim 1 and claim 13 is dependent on claim 12, it is respectfully submitted that claims 3, 7 – 9, 11 and 13 are also not anticipated by Wessol. Therefore, withdrawal of the rejection is respectfully requested.

Rejection of Claims 2-4-6, 10 and 14 under 35 USC § 103(a)

Claims 2, 4-6, 10 and 14 are rejected under 35 U.S.C. 103(a) as being unpatentable by Wessol et al (U.S. Patent No. 6,965,847) in view of Good (U.S. Patent No. 6,099,457) and in further view of Widener et al. (U.S. Publication No. 2004/0236207).

Claim 2 is dependent on claim 1 and is considered patentable for the reasons presented above with respect to claim 1. Claim 2 is also considered patentable because Wessol (with Good and/or Widener) fail to provide any 35 USC 112 compliant enabling disclosure that the "input processor automatically acquires patient radiation survey record data from radiation survey equipment indicating radiation levels emitted by a patient" and that the "storage processor stores said acquired patient radiation survey record data in said repository" as recited in the present claimed invention. For the reasons presented below, Good and Widener add nothing that makes the present invention as claimed in claims 1 or 2 unpatentable.

Good provides a method for making radioactive spheres that may be used in radioactive therapy and treatment of a patient (see Abstract). This is fundamentally different from the present claimed system which seeks to monitor radioactive doses from different radioactive sources and which utilizes a "workflow processor" to schedule and manage a sequence of tasks involved in producing a treatment plan that takes into account the stored "combined therapeutic dose value" of radiation already received by the patient. The Rejection cites column 3, lines 4 – 11 and column 5, lines 39 – 47 of Good in support of the assertion that Good discloses the automatic summation of dose values claimed in the present invention. Applicant respectfully disagrees. Rather, the section of column 3 cited merely describes producing an implantable radioactive device that delivers high energy irradiation to a tumor cite. There is nothing in this section (or elsewhere) of Good that discloses or suggests "automatically summing values representing said first and second dose to provide a combined therapeutic dose value" as recited in the present claimed system. The description in Column 5 of good also adds nothing that could allow one to reasonably conclude that Good discloses the automatic summation feature of the present claimed system. Instead the cited section of Good merely describes how the implant hopes to affect a cancer cell by releasing radiation. Good is wholly unlike and unrelated to the present claimed invention as Good merely describes producing a source of radiation that may be monitored using the claimed system.

Widener provides a surface mount radiation dosimeter that is able to evaluate the radiation dosage applied to a patient that is undergoing radiation therapy. These patches are applied to a patient and the dosage of radiation over each patch can be sensed and calculated. Widener while providing a manner to capture information regarding the dose of radiation provide, Widener fails to disclose or suggest producing a "combined therapeutic dose value" that is used by a "workflow processor for scheduling and managing a sequence of tasks involved in producing a treatment plan using said electronic record" which has the combined therapeutic dose value stored therein.

Additionally, Good and Widener (with Wessol) are not at all concerned with automatically acquiring data from radiation **survey** equipment corresponding to an amount of radiation **emitted** by a patient. Rather, each of these systems, when taken alone or in any combination with one another, are concerned with entirely unrelated problems. Wessol merely creates an image to improve targeted radiation therapy for a patient. Good describes how to produce a radiation source and Widener provides patches that may be used to measure radiation over a particular area on the body. This is fundamentally different from the claimed system because the claimed system facilitates treatment and planning of radiation therapy that complies with NRC safety regulations by surveying a total amount of radiation emitted by internal and external radiation sources **AND** also emitted by the patient. Good and Widener (with Wessol) provides no 35 USC 112 compliant enabling disclosure of these features.

Applicant respectfully submits that there is no motivation to combine any of Wessol, Good and Widener as they are all in fundamentally different areas of art. Specifically, Wessol is concerned with providing a geometric model of radiation applied to a patient to improve the view of how the radiation affects the patient. Widener provides a patch that senses the amount of radiation being applied to a patient and Good provides a method for producing a source of the radiation used to treat a patient. These references provide unrelated apparatus that each accomplish entirely unrelated objectives. There would be no reason to combine an implantable device for emitting radioactive therapy (as in Good) with a system such as Wessol which computationally models the emitted radiation with respect to the body to aide in modifying the dosage of radiation used in treatment of the patient. Therefore, Applicant respectfully submits that there is no reason or motivation to combine these references.

Additionally, even if one were to combine these references, the result would not produce a system equivalent to the present claimed invention. The system resulting from the combination of Wessol, Good and Widener would not be structurally or functionally equivalent to the present claimed system. The combination neither discloses nor suggests a "combined therapeutic dose value" that is used by a "workflow processor for scheduling and managing a sequence of tasks involved in producing a treatment plan using said electronic record" which has the combined therapeutic dose value stored therein. Consequently, withdrawal of the rejection is respectfully requested.

Claim 4 is dependent on claim 1 and considered patentable for the reasons presented above with respect to claims 1 and 2 and 12. Claim 4 is also considered patentable because Wessol (with Good and/or Widener) fails to provide any 35 USC 112 compliant enabling disclosure of "a rules processor for initiating generation of an alert message for communication to a healthcare worker, in response to said combined therapeutic dose value and automatically initiating generation of an alert message for communication to a healthcare worker, in response to determining inappropriate **radiation settings of a radiation imaging or therapy device** in response to said combined therapeutic dose value" as recited in claim 4. There is no mention in any of Wessol, Good or Widener of determining that a level of radiation to be emitted by a device is inappropriate in view of a combined therapeutic dose value and automatically generating an alert message in response thereto. These systems, as discussed above, are fundamentally different from the present claimed invention. Unlike Good, Widener and/or Wessol, the present claimed invention provides a system that aids in complying with government guidelines associated with radioactive methods of patient treatment. Specifically, the claimed system includes a "rules processor" that interacts with radiation imaging and/or therapy devices and determines if settings of the device are "inappropriate" in view of the combined therapeutic dose value. Thus, the claimed system advantageously controls tasks associated with a treatment plan and ensures compliance with NRC guidelines by using a combined therapeutic dose value applied to a patient to check the settings on the radiation device to make sure they are within acceptable levels. Consequently, withdrawal of the rejection of claim 4 is respectfully requested.

Claims 5 and 6 are dependent on claim 1 and are considered patentable for the reasons presented above with respect to claims 1 and 2. Consequently, withdrawal of the rejection of claims 5 and 6 is respectfully requested.

Claim 10 is dependent on claims 1 and 9 and is considered patentable for the reasons presented above with respect to claims 1, 2 and 9. Consequently, withdrawal of the rejection of claim 10 is respectfully requested.

Independent claim 14 is considered patentable for the reasons presented above with respect to claims 1 and 2. Claim 14 is also considered patentable because Wessol (with Good and/or Widner) fail to disclose or suggest the feature combination claimed in independent claim 14. Additionally, the present claimed invention is concerned with radiation treatment planning using a total amount of radiation that is applied to a particular body part and using the "combined therapeutic dose value" that is stored in a patient record "for scheduling and managing a sequence of tasks involved in producing a treatment plan using said electronic record". Wessol (with Good and/or Widner) neither discloses nor suggests this feature. As discussed above, Wessol (with Good and/or Widner) fails to provide "a combined therapeutic dose value" because Wessol (with Good and/or Widner) is concerned with a single radiation source that emits an amount of radiation less than therapeutically required but in an amount enabling creation of a radiation image to improve dosage changes for the particular patient on the particular body part. . While Wessol provides that the single source may be internal or external from the patient, this is not equivalent to "automatically summing values representing said first and second does" where the first dose is "from a radiation source external to a patient" and the second dose is "received by said particular anatomical part of said patient from a radiation source internal to and implanted within said patient" as recited in the present claimed invention. The claimed system advantageously enables a total amount of radiation from multiple sources to electronically document and store a combined value that is used to schedule and manage tasks that must comply with Nuclear Regulatory Commission (NRC) regulations regarding safe levels of radiation. Thus, the combined therapeutic dose value facilitates treatment planning to ensure that, despite irradiation therapy, the patient will be able to safely intermingle with the public (Application, page 3 line 2 – page 4, line 3). In contrast to the systems of Wessol, Good and/or Widener, the claimed arrangement uses a "workflow processor" that uses combined therapeutic dose value of radiation from internal and external sources to aid in "scheduling and managing a sequence of tasks involved in producing a treatment plan" for the particular patient. Wessol (with Good and/or Widener) fail to provide any equivalent structural elements that perform the claimed features. Consequently, withdrawal of the rejection of claim 14 is respectfully requested.

In view of the above remarks and amendments to the claims, Applicant respectfully submits that Wessol, Good and Widener fail to provide any 35 USC 112 compliant enabling disclosure that would make the present invention as claimed in claims 1 and 14 unpatentable. As claims 2, 4 – 6 and 10 are dependent on claim 1, it is respectfully submitted that these claims are also not made unpatentable by Wessol, Good and/or Widener. Therefore, withdrawal of the rejection is respectfully requested.

New claims 15 and 16 have been added for consideration. New claims 15 and 16 are considered patentable over Wessol, Good and/or Widener, alone or in any combination, in view of their dependence on claim 12. Claim 15 is also considered patentable for the reasons presented above with respect to claim 2. Claim 16 is also considered patentable for the reasons presented above with respect to claim 3.

New claims 17 and 18 have been added for consideration. New claims 17 and 18 are considered patentable over Wessol, Good and/or Widener, alone or in any combination, in view of their dependence on claim 14. Claim 17 is also considered patentable for the reasons presented above with respect to claim 4. Claim 18 is also considered patentable for the reasons presented above with respect to claim 8.

Having fully addressed the Examiner's rejections, it is believed that, in view of the preceding amendments and remarks, this application stands in condition for allowance. Accordingly then, reconsideration and allowance are respectfully solicited. If, however, the Examiner is of the opinion that such action cannot be taken, the Examiner is invited to contact the applicant's attorney at the phone number below, so that a mutually convenient date and time for a telephonic interview may be scheduled.

Respectfully submitted,
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